NEW YORK

OPTIONAL STATE SUPPLEMENTATION

STATUTORY BASIS

FOR PAYMENT

Section 209, New York State Social Services Law.

EFFECTIVE DATE January 1, 1974.

ADMINISTRATION¹ Social Security Administration and Department of Social Services.

PASSALONG In compliance by the method of maintaining all payment levels.

SCOPE OF COVERAGE

Optional State supplement provided for every recipient except those in community operated residences having 16 or fewer residents, in publicly operated emergency shelters, or in Medicaid facilities where Medicaid pay less than 50 percent of the cost of care. Blind and disabled children are eligible for optional State supplementation at the Congregate Care Level I² and Level II rates, and the "living with others" rate. Congregate care is

provided in a nonmedical setting. Supplementation for congregate $% \left(1\right) =\left(1\right) \left(1\right) \left($

care varies according to geographical area.

RECOVERIES, LIENS, AND ASSIGNMENTS

None.

RELATIVE

RESPONSIBILITY

None.

INCOME DISREGARDS No disregards in addition to the Federal income disregards.

RESOURCE LIMITATIONS Federal SSI resource limitations apply.

PLACE OF APPLICATION

Social Security Administration district offices.

FUNDING Assistance: State funds.

Administration: State funds.

¹ Both mandatory minimum and optional supplementation are administered by the Social Security Administration. The State administers an additional \$20 payment to some SSI recipients in Medicaid facilities.

² Children must be placed by Department of Mental Hygiene (DMH).

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INTERIM ASSISTANCE

State participates.

PAYMENT LEVELS³

		Combined Federal/State		State supplementation	
<u>Code</u>	Living arrangements	<u>Individual</u>	<u>Couple</u>	<u>Individual</u>	<u>Couple</u>
A	Living alone	\$556.00	\$807.50	\$86.00	\$102.50
В	Living with others	493.00	750.00	23.00	45.00
C	Congregate care I: ^{4 5}				
	Areas A and B	736.48	1,472.96	266.48	767.96
	Area C	698.48	1,396.96	228.48	691.96
D	Congregate care II: ^{5 6}				
	Areas A and B	905.00	1,810.00	435.00	1,105.00
	Area C	875.00	1,750.00	405.00	1,045.00
E	Congregate care III: ^{5 7}				
	Area A	952.96	1,905.92	482.96	1,200.92
	Areas B and C	928.96	1,857.92	458.96	1,152.92
F	Living in household of another	336.34	515.00	23.00	45.00
G	Medicaid facility ⁸	35.00	70.00	5.00	10.00

³ Unless otherwise stated, payment levels apply equally to aged, blind, and disabled.

⁴ The minimum personal needs allowance is \$91.

⁵ Payment levels differ by geographic area. Area A is New York City; Area B is Nassau, Suffolk, and Westchester counties; and Area C is all other counties.

⁶ The minimum personal needs allowance is \$106.

⁷ The minimum personal needs allowance is \$72.

State administers an additional payment (\$20 per individual, \$40 per couple) to SSI recipients who are New York State residents and reside in health care facilities defined in Section 2801 of the New York State Public Health Law (i.e., hospitals, nursing homes).

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STATE ASSISTANCE FOR SPECIAL NEEDS

ADMINISTRATION Department of Social Services.

SPECIAL NEED CIRCUMSTANCES:

EMERGENCY An emergency assistance grant can be provided to an SSI recipient to

ASSISTANCE safeguard health, safety, and welfare.

SHELTER- Moving expenses, brokers' fees, security deposits, storage fees,

RELATED maintenance of home during hospitalization, establishment of a home

EXPENSES when deinstitutionalized.

REPLACEMENT

OF BASIC

NEEDS ITEMS

Replacement of furniture, clothing, food, fuel, etc., lost as a result of

fire, flood, or other catastrophe.

REPAIR OR

REPLACEMENT

OF MAJOR APPLIANCES Repair or replacement of essential household equipment, including

heating and plumbing equipment, and major appliances.

FOOD FOR GUIDE

DOG

A recurring assistance grant is provided for the purchase of food for a

guide dog to unemployed blind or deaf persons.

OTHER

CIRCUMSTANCES

Payments for goods and services already received; chattel mortgages

and conditional sales contracts; replacement of lost, stolen, or $% \left\{ 1\right\} =\left\{ 1\right\} =\left$

mismanaged cash; replacement of lost, stolen, or unreceived SSI checks

(subject to recoupment).

MEDICAID

ELIGIBILITY:

CRITERION SSI program guidelines (title XVI).

DETERMINED BY Social Security Administration.

MEDICALLY NEEDY

PROGRAM

Program for the aged, blind, and disabled medically needy.

UNPAID MEDICAL

EXPENSES

The Social Security Administration does not obtain this information.